

FAX TRANSMITTAL		
	From	
	Phone #	
Fax #: 706-787-3024	Fax #	

TRICARE PCS Transfer Form

	Complete and fax this form to the number listed above during out-processing, or, prior to from the overseas duty assignment.	
SPONSOR INFORMATION	Last Name:	
	Social Security Number: _	
	Current Duty Station:	
R INF	Date of Departure from Ov	erseas Assignment:
OSN	New Duty Station Information	
SPC	Approximate Arrival Date at New Location:	
	New Location/Command:	
	-	
	List Family Mambars Cumuntly	Residing in TLAC and Departure Date:
SR (Spouse:	Transfer Date:
EMBE	Child 1:	Transfer Date:
AMILY MEMBE INFORMATION	Child 2:	Transfer Date:
FAMILY MEMBER INFORMATION	Child 3:	Transfer Date:
1	Child 4:	Transfer Date:
	Child 5:	Transfer Date:
Child 5: Transfer Date: Please call the TLAC Support Office toll free at 888-777-8343 option # 3, or commercial 706-787-3340, 8057 or 3020, if you have questions.		
"I understand that to remain enrolled in TRICARE Prime, I must act to transfer my enrollment as		
soon as I arrive at my next duty station or residence. I further understand that all family members will be disenrolled from TLAC Prime 60 days from the (active duty sponsor's) overseas departure		
date if I do not transfer their enrollment."		
		Signature of Active Duty Sponsor or Spouse Listed Above

Revision Date: 27 Feb 04 TSO